

10 NCAC 14C .2102 is proposed to be amended as follows:

**10A NCAC 14C .2102 INFORMATION REQUIRED OF APPLICANT**

(a) An applicant proposing to establish a new ambulatory surgical facility, to increase the number of operating rooms, to convert a specialty ambulatory surgical program to a multispecialty ambulatory surgical program or to add a specialty to a specialty ambulatory surgical program shall identify each of the following specialty areas that will be provided in the facility:

- (1) gynecology;
- (2) otolaryngology;
- (3) plastic surgery;
- (4) general surgery;
- (5) ophthalmology;
- (6) orthopedic;
- (7) oral surgery; and
- (8) other specialty area identified by the applicant.

(b) An applicant proposing to establish a new ambulatory surgical facility, to increase the number of operating ~~rooms,~~ rooms except relocations of existing operating rooms between existing licensed facilities within the same service area, to convert a specialty ambulatory surgical program to a multispecialty ambulatory surgical program or to add a specialty to a specialty ambulatory surgical program shall provide the following ~~information regarding the services to be offered in the facility following completion of the project:~~ information:

- (1) the number and type of ~~existing and proposed~~ operating ~~rooms;~~ rooms in each licensed facility which the applicant or a related entity owns a controlling interest in and is located in the service area, (separately identifying the number of dedicated open heart and dedicated C-Section rooms);
- (2) the number and type of ~~existing and proposed shared~~ operating ~~rooms;~~ rooms to be located in each licensed facility which the applicant or a related entity owns a controlling interest in and is located in the service area after completion of the proposed project and all previously approved projects related to these facilities (separately identifying the number of dedicated open heart and dedicated C-Section rooms);
- (3) the ~~current and projected~~ number of inpatient surgical procedures, identified by CPT code or ICD-9-CM procedure code, cases, excluding trauma cases reported by Level I, II, or III trauma centers, cases reported by designated burn intensive care units, and cases performed in dedicated open heart and dedicated C-section rooms, and the number of outpatient surgical cases to be performed in the most recent 12 month period for which data is available, in the operating rooms; rooms in each licensed facility listed in response to Subparagraphs (b)(1) and (b)(2) of this Rule;
- ~~(4) the fixed and movable equipment to be located in each operating room;~~
- (4) the number of inpatient surgical cases, excluding trauma cases reported by level I, II, or III trauma centers, cases reported by designated burn intensive care units and cases performed in dedicated

- 1           open heart and dedicated C-section rooms, and the number of outpatient surgical cases projected  
2           to be performed in each of the first three operating years of the proposed project, in each licensed  
3           facility listed in response to Subparagraphs (b)(1) and (b)(2) of this Rule;
- 4           (5)   a detailed description of and documentation to support the assumptions and methodology used in  
5           the development of the projections required by this Rule;
- 6           ~~(5)~~ (6) the hours of operation of the proposed new operating rooms;
- 7           ~~(6)~~ (7) if the applicant is an existing facility, the average ~~charge~~ reimbursement received per procedure  
8           for the 20 surgical procedures most commonly performed in the facility during the preceding 12  
9           months and a list of all services and items included in ~~each charge~~; the reimbursement;
- 10          ~~(7)~~ (8) the projected average ~~charge~~ reimbursement to be received per procedure for the 20 surgical  
11          procedures which the applicant projects will be performed most often in the facility and a list of all  
12          services and items included in ~~each charge~~; the reimbursement; and
- 13          ~~(8)~~ (9) identification of providers of pre-operative services and procedures which will not be included in  
14          the facility's charge.
- 15   (c) An applicant proposing to relocate existing operating rooms between existing licensed facilities within the same  
16   service area shall provide the following information:
- 17          (1)   the number and type of existing and approved operating rooms in each licensed facility in which  
18          the number of operating rooms will increase or decrease (separately identifying the number of  
19          dedicated open heart and dedicated C-Section rooms);
- 20          (2)   the number and type of operating rooms to be located in each affected licensed facility after  
21          completion of the proposed project and all previously approved projects related to these facilities  
22          (separately identifying the number of dedicated open heart and dedicated C-Section rooms);
- 23          (3)   the number of inpatient surgical cases, excluding trauma cases reported by Level I, II, or III  
24          trauma centers, cases reported by designated burn intensive care units, and cases performed in  
25          dedicated open heart and dedicated C-section rooms, and the number of outpatient surgical cases  
26          performed in the most recent 12 month period for which data is available, in the operating rooms  
27          in each licensed facility listed in response to Subparagraphs (c)(1) and (c)(2) of this Rule;
- 28          (4)   the number of inpatient surgical cases, excluding trauma cases reported by level I, II, or III trauma  
29          centers, cases reported by designated burn intensive care units and cases performed in dedicated  
30          open heart and dedicated C-section rooms, and the number of outpatient surgical cases projected  
31          to be performed in each of the first three operating years of the proposed project, in each licensed  
32          facility listed in response to Subparagraphs (c)(1) and (c)(2) of this Rule;
- 33          (5)   a detailed description of and documentation to support the assumptions and methodology used in  
34          the development of the projections required by this Rule;
- 35          (6)   the hours of operation of the facility to be expanded;

- 1       (7) the average reimbursement received per procedure for the 20 surgical procedures most commonly  
2       performed in each affected licensed facility during the preceding 12 months and a list of all  
3       services and items included in the reimbursement;  
4       (8) the projected average reimbursement to be received per procedure for the 20 surgical procedures  
5       which the applicant projects will be performed most often in the facility to be expanded and a list  
6       of all services and items included in the reimbursement; and  
7       (9) identification of providers of pre-operative services and procedures which will not be included in  
8       the facility's charge.

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10   *History Note: Authority G.S. 131E-177; 131E-183(b);*  
11       *Eff. November 1, 1990;*  
12       *Temporary Amendment Eff. September 1, 1993 for a period of 180 days or until the permanent*  
13       *rule becomes effective, whichever is sooner;*  
14       *Amended Eff. January 4, 1994;*  
15       *Temporary Amendment Eff. July 1, 2001;*  
16       *Temporary Amendment Eff. January 1, 2002;*  
17       *Amended Eff. August 1, 2002;*  
18       *Temporary Amendment effective January 1, 2002 amends and replaces the permanent rule*  
19       *effective August 1, 2002; Amended Eff. April 1, 2003;*  
20       *Temporary Amendment Eff. February 1, 2008.*